PTO/SS/21 (04-07)

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TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Application Number 10/623,577-Conf. #6543 Filing Date July 22, 2003 First Named Inventor **Raymond Pratt** Art Unit 1614 **Examiner Name** J. Anderson Attorney Docket Number 61368-223339

Total Number of Pages in This Submiss	sion	Attorney Docket Numi	ber (61368-223339							
ENCLOSURES (Check all that apply)											
x Fee Transmittal Form	Drawing(s)			After Allowance Communication to TC							
Fee Attached	Licensing-rel	ated Papers		Appeal Communication to Board of Appeals and Interferences							
X Response and Amendment	Petition			Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)							
After Final	Petition to Co Provisional A			Proprietary Information							
Affidavits/declaration(s)	Power of Attorney, Revocation Change of Correspondence Address			Status Letter							
x Extension of Time Request	Terminal Disclaimer			Other Enclosure(s) (please Identify below):							
Express Abandonment Request Request for Refund				PTO Form SB08A and 2 references attached.							
x Information Disclosure Statement	CD, Number	of CD(s)									
Certified Copy of Priority Document(s)	Landso	ape Table on CD									
Reply to Missing Parts/ Incomplete Application	Remarks										
Reply to Missing Parts under 37 CFR 1.52 or 1.53											
	JRE OF APPLICA	ANT, ATTORNEY, O	RAGE	ENT							
Firm Name VENABLE LLP		1									
Signature	OLJ XX										
Printed name Edward D. Grieff	7 4		/								
Date September 28, 2007		Reg. Mo.	38	,898							

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PTO/SB/17 (07-07)

Approved for use through 06/30/2010. OMB 0651-0032
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Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).			Complete if								
			1 · · · · · · · · · · · · · · · · · · ·		10/623,577-Conf. #6543						
FEE TRANSMITTAL			Filing Date		July 22, 2003						
For FY 2007			First Named Inventor Raymond Pratt								
			Examiner Name J. Anderson								
Applicant claims small entity status. See 37 CFR 1.27			Art Unit 1614								
TOTAL AMOUNT OF PAYMENT (\$) 300.00				Attorney Docket No. 61368-223339							
METHOD OF PAYMENT (check all that apply)											
Check Credit Card Money Order None Other (please identify):											
x Deposit Account Deposit Account Number: 22-0261 Deposit Account Name: Venable LLP											
For the above-io	dentified deposit	account, the Di	rector is	hereby authorize	ed to: (che	ck all that apply)				
x Charge fe	e(s) indicated be	elow		Charg	e fee(s) ind	dicated below, o	except for t	the filing fee			
Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17											
FEE CALCULATION											
1. BASIC FILING, SEAI	RCH, AND EXA	MINATION FEE	S								
	FILIN	IG FEES	SE	ARCH FEES	EXAMIN	NATION FEES	3				
Application Type	<u>Fee (\$)</u>	Small Entity Fee (\$)	Fee (\$	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fees	Paid (\$)			
Utility	300	150	500	250	200	100					
Design	200	100	100	50	130	65					
Plant	200	100	300	150	160	80					
Reissue	300	150	500	250	600	300					
Provisional	200	100	0	0	0	0					
2. EXCESS CLAIM FEE	S							Small Entity			
Fee Description Each claim over 20 (inc	luding Reissues	;)					Fee (\$) 50	Fee (\$) 25			
Each independent claim over 3 (including Reissues)							200	100			
Multiple dependent clai	ms						360	180			
Total Claims Ex	tra Claims	Fee (\$)	Fee F	Paid (\$)	M	ultiple Depend	ent Claims	ļ			
- 20 =	x _	= _			Fee (\$)		Fee Paid (<u>\$)</u>			
HP = highest number of tota											
		Fee (\$)	Fee F	Paid (\$)							
-3 = HP = highest number of inde			n 3.								
3. APPLICATION SIZE		1100 1	•								
If the specification and listings under 37 Cl sheets or fraction th	FR 1.52(e)), the	application size	e fee du	e is \$250 (\$125 t	onically fi for small e	led sequence on ntity) for each	r computer additional 5	0			
Total Sheets	Extra Sheets			dditional 50 or fra	ction thereo	f Fee (\$)	Fee	Paid (\$)			
				(round up to a who			=	τ αια (φ)			
4. OTHER FEE(S)					·		Fees	Paid (\$)			
Non-English Specifi	cation, \$130 fe	e (no small ent	ity disco	ount)							
Other (e.g., late filing surcharge): 1251 Extension for response within first month 1806 Submission of an information Disclosure Statement								20.00 80.00			
SUBMITTED BY		مرا م									
Signature	KYUV	MI	MAC	Registration No. (Attorney/Agent)	38,898	Telephone	(202) 34	4-4382			
Name (Print/Type) Edwar	rd D. Grieff	-y 11	$-\Lambda$	\ \ \	-	Date	Septembe	r 28, 2007			
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